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**A DESCRIPTIVE STUDY OF THE OPINIONS OF FIFTH THROUGH  
EIGHTH GRADE STUDENTS ON ADDICTIVE SUBSTANCES**

**By  
Denise Pierce**

**A Thesis**

**Submitted in partial fulfillment of the requirements of the  
Masters of Arts Degree  
Of  
The Graduate School  
At  
Rowan University  
May 1999**

**Approved by** \_\_\_\_\_  
**Professor**  
**Date Approved** 5/3/99

## **ABSTRACT**

Denise A. Pierce

A Descriptive Study of the Attitudes of Fifth –Eighth Grade Students on Addictive  
Substances

1999

Dr. Roberta Dihoff and Dr. John Klanderman

School Psychology

The purpose of this study is to examine whether changes in attitudes would occur in students from Grades Five through Grade Eight in regard to addictive substances, such as alcohol and cigarettes. The study consisted of 85 students enrolled in a local Roman Catholic Grammar School. Students were given the Youth Attitude Survey, which was developed at Columbia University. The survey yielded results that were related to risk factors for future drug use. In a variety of areas, including whether marijuana should be legalized and if the student believed they would use drugs in the future, there was a pronounced difference in the attitudes.

## **MINI-ABSTRACT**

Denise A. Pierce

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Dr. Roberta Dihoff and Dr. John Klanderman

School Psychology

The purpose of this study is to examine whether changes in attitudes would occur in students from Grades Five through Grade Eight in regard to addictive substances, such as alcohol and cigarettes. The results of the study indicated that there was changes in attitudes in students in grades fifth through eighth in regards to drugs and drug use.

### **Acknowledgements:**

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I would like to thank my mother. Thanks for the endless free babysitting and many things that I can't even begin to list here. Thanks for the encouragement. We have come a long way since U of D. This is for you too Dad. Sorry you are not here to see it, but you are always with me

To my son Zachary, mommy can spend some more time with you now. You have shown me what is most important in life. I love you!!!

Last of all.. Thank you Bob. You have always seen the best in me and have made me believe in myself. Thanks for your love and faith. The greatest part of my life is the part I share with you. You have and always will be my best friend and love of my life.

..... and I am outta here!!!!!!

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## **Chapter 1: The Problem**

### **Need**

As we look upon our ever-changing society, there are some frightening and surreal statistics that confront us. One of these statistics is the fact that American adolescents are using and abusing addictive substances at an alarming rate. What is more disturbing about this fact is that the age of the onset of the use of these addictive substances is becoming younger and younger. When influenced by the presence of mind-altering substances, the incidence of counter productive behavior is increased. Occurrence of unprotected sexual encounters is an example of such behavior. This leads to an increase in the amounts of STDs (sexually transmitted diseases) as well as unwanted teenage pregnancies. Many of today's youth cross the boundary from substance abuser to substance addict while in their teenage years. The need for preventative measure is apparent. In many of the schools systems around the country, D.A.R.E. program is one of those preventative programs. However D.A.R.E. programs often do not follow the student through school, in many schools D.A.R.E. stops at Grade 5. Is D.A.R.E. enough for today's' troubled youth or do we need tougher and more reality based programs? Is there any educational program that is more powerful than the influence of peer pressure on the youth of today?

## **Purpose**

The purpose of this study is to examine the attitudes changes that transpire in students between the grades of 5-8 in a school in which the D.A.R.E. program has been implemented. These attitudes will be examined by how they manifest into selected risk factors. It is the intent of the researcher to examine the effect that the educational program has on the attitudes of the students exposed to the knowledge. The absence of an educational program in various grade levels will also be examined. The school, which was utilized, incorporated the D.A.R.E. program until the completion of Fifth Grade. Attitudes about various addictive substances, both legal and illegal will be examined. It has been proven that adolescents' attitude about drugs is related to their future in regards to possible drug use. The study will also view how peers affect the actions of each other. The focus of this research will be specifically on students in a Roman Catholic elementary school.

## **Hypothesis**

Students' attitudes will change between fifth and eighth grade in regard to areas of drugs and drug use as manifested by selected risk factors, both controlled and non-controlled. There will be a negative increase in controlled factors as the grade level increases.

## **Theory**

Erik Erikson discussed the eight stages of ego development that individual's progress through during the course of their lives. During two of these stages (latency and adolescence) a person will encounter struggles, or ego crisis, that are hoped to result in the development of purpose and competence. These are fundamental aspects of a child's development. During these periods of conflicts, a child will make many decisions that will influence the development of their personality. The decision of whether to experiment with addictive substances is one of those decisions. Jean Piaget has formulated the theory of cognitive development that is also paramount in examining the thought processes that would be utilized by an adolescent. The age groups that will be examined are going to fall into both the concrete and formal operational stages of cognitive development. Many people who are instrumental in the development and utilization of drug education programs also agree with these theories and consider them when formulated a drug education curriculum. It has been noted that drug education programs need to be directly correlated to the developmental stage an adolescent is experiencing in order for it to be effective (Blum, 1978). In order to truly help the student, we must also look at when in their development is it most advantageous to help them.

Throughout adolescence, children experience a great amount of stress, often not realizing the impact that stress can have on their existence. Peer pressure is a major source of stress in their lives. It has been proven that stress will often lead to the use of addictive substances as a source of relief (Henry, 1989). Today, drugs are often glamorized and may seem appealing to today's youth. The experimentation with drugs would solve the dilemma of the mounting peer pressure as well as a form of relief for the escalating stress in the eyes of many of today's youth.

It has also long been believed that Albert Bandura's Social Learning Theory is strongly related to an adolescent's drug use (Brehm & Kassin, 1990). Adolescents will see that their peers are using addictive substances and therefore feel more of an attraction to possible use themselves. The original logic or reasoning for the use is not always as important as the strength of the need to be the same as their peers. Modeling can be used also to initiate positive behavior in students: this is a critical aspect of drug education.

But how can parents and caregivers know when the adolescent in their lives are at risk? The National Center on Addiction and Substance Abuse at Columbia University (CASA) has established risk factors that have been found to be present in many adolescents that have used addictive substances. These "risk characteristics" include the number of times that an adolescent has dinner with his/her family, the amount of involvement with church or religious organizations, stability of family life, the alcohol and marijuana consumption of adolescent's parents when they were adolescents, and an adolescents' position on reporting another person using/selling drugs. These risk factors can give a glimpse of an adolescents' potential to begin use of addictive substances. Also

to be considered is their opinions and attitudes about legalization of drugs, such as marijuana, and their own belief about the probability that they will use addictive substances in their own future.

Much research has been conducted on the effects of exposure to educational programs on substance use in adolescents. Many believe that the implementation of programs such as D.A.R.E. in our school systems has made progress in the prevention of drug use. However, too many D.A.R.E. and similar programs can cause greater detriment than positive outcomes.

### **Definitions**

**Abuse-** the misuse or overuse of a substance (using more than the norm); using a substance in a way different from the way it is generally used, either medically or socially; using an illegal substance (including alcohol and cigarettes if one is underage); continued use of a substance even though it is causing problems in one's life.

**Addictive substances-** any substance, both legal and illegal, that possess addictive qualities. Examples of these would be cigarettes, alcohol, marijuana, cocaine, and inhalants such as glue, amphetamines, barbiturates, opiates such as heroin.

**Addiction-** loss of control and compulsive use of a mood or mind-altering chemical or chemicals, along with the inability to stop the use in spite of the fact that such use is

causing problems in one's life. Having a physical and/or psychological dependence on a substance.

**D.A.R.E.** - Drug Abuse Resistance Education, which was developed by the police department and school system in Los Angeles. D.A.R.E. has been adopted by half of the school districts in the United States.

**Drug dependency**- a physical and/or psychological need for a mood-altering substance. Physical dependency is frequently associated with the development of tolerance and the presence of symptoms when the drug is withdrawn.

**Mind-altering drug** - any substance that affects mood or thinking.

### **Assumptions**

It is assumed that the students are answering the survey honestly. It is assumed that students that are surveyed are representative of adolescents in their age groups

### **Limitations**

The number of students is limited to one Parochial school in Glassboro, New Jersey. The number of participants is small for making generalizations of the population.



## **Overview**

The relevant research material related to substance use in adolescent, peer pressure and the use of educational programs, as a deterrent for substance use will be examined in Chapter 2. This research will enable an understanding of substance use and today's adolescence.

In Chapter 3, a description of the design of the study will be discussed. Also discussed in Chapter 3 is an overview of the sample population that is being studied.

Chapter 4 will be the presentation and analysis of the results that have been obtained. In Chapter 4, the significance of the research finding will also be presented.

## **Chapter 2: Research Review**

### **Introduction**

Adolescents and drug abuse are a major area of concern in today's society. The reports are painting a bleak picture when illustrating the extent of the problem.

Investigation has discovered that solicitation of drugs to school age children by drug dealers is becoming focused more on younger children. (Hutchinson and Little, 1985)

Research has shown that many children have tried alcohol and drugs by the time they reach the age of 12 years old. (Finke and Bowman, 1997)

The area of substance use by adolescence has incorporated many different aspects of research. Although much of this research is compelling and relevant, specific areas of this research will be reviewed. The hypothesis of this thesis is based upon the attitudes of adolescents in regards to drug use. The attitudes and beliefs that are developed by adolescents have impact upon future actions and therefore impact upon their decision to use drugs. In light of this idea, this research review will incorporate areas that will influence adolescence's' attitudes toward drugs. These areas of influence include the roles of parents, peers, and school and social environment. The research review will also investigate the extent of the drug problem, drug education programs, gender differences, and trends. The final section in the research review will be to examine the previous attitude surveys that have been presented to adolescents.

## **Influence of Family Members**

Today's parents have an undaunting task of attempting to raise children in a society where the war on drugs has taken many prisoners. Unfortunately, many of the parents are placing their heads in the sand in regards to how bad this war is. According to the Partnership Attitude Tracking Study, parents underestimate the effects that illegal drug use and availability of drugs have on today's children. Some of the specific findings included: 1) 21% of parents reporting that they believed that their teenage children had tried marijuana, 44% of teens report they have tried the drug 2) Only 43% of parents thought it would be easy for their children to obtain marijuana, but 58% of teens said marijuana was easy to find 3) One-third of parents said their teenagers would consider marijuana harmful to their health, actually only 18% of teens felt that marijuana was dangerous to their health (Partnership for a Drug Free America, 1997)

The attitudes and conduct of teens and their parents have an impact on the likelihood that the adolescent will use drugs. In research conducted by CASA, eight warning signals have been seen: 1) teen or parent thinks marijuana is relatively harmless 2) teen says buying marijuana is easy 3) teen thinks having sex under 18 is okay 4) teen drinks alcohol 5) parents impose no curfew 6) family rarely eats dinner together 7) teen gets poor grades 8) teen and family have no religious involvement. (CASA, 1996)

Research continues to examine the influence of the family unit on substance use. Gritching and Barber have found that the frequency of alcohol and drugs use by children

was related to the alcohol and drug use by their siblings. Often times the older siblings were the source of drugs and alcohol for the younger siblings. (Gritchting and Barber, 1989) One of the best predictors of future alcohol and drug use in children was the drug use by their parents. Many researchers believe that there is a genetic link in regards to alcoholism. (Bush and Iannotti, 1993)

### **Influence of Peers**

The influence of peers and peer groups is immense. In almost all research when discussing what influences an adolescent in his/her decision to use drugs, peers is usually the number one contributing factor. Nowhere is that more evident then in the research that was conducted by Black, Tobler, and Sciacca. The research investigated the effectiveness of peer led drug prevention programs as opposed to the traditional teacher/adult led drug prevention programs. The result showed a significant change in students cognitive, attitudinal, and personality predisposing variables. There was also evidence to the positive effect of the student led prevention programs on cigarette smoking, excessive drinking, and cannabis use. (Black et al., 1998)

### **Influence of School Environment**

The finger is often pointed at schools as having failed the youth of today in respect to drug education. The sole blame of the adolescent drug epidemic cannot be placed entirely upon the shoulders of the school system. As stated by our current First Lady, "it takes a village to raise a child." Studies have been implemented that explore

areas that could be effectively used by the schools systems to aid with the war on drugs. A school curriculum could incorporate areas that would be beneficial for elementary age school children. These include (1) development of coping skills (2) resistance to peer pressure (3) enhancement of self-esteem and assertion skills (4) development of problem solving skills. It has also been suggested that in later grades the following items could be added to the curriculum (1) an understanding of the short-term effects and consequences of chemical use (2) why youths use substances (3) attitudes toward use and users (4) factors associated with dependency, and (5) analysis of advertising techniques (Fox, Forbing, & Anderson, 1988)

### **Influence of Community Environment**

The influence that the society at large has on the youth of America is vast. Areas of media and advertising have long capitalized on the youth and their expendable cash. Tobacco companies have long been criticized for developing ad campaigns that target the youth market. A message that cigarettes make you cool helps to shape the attitudes of adolescents. The media ultimately glorifies use of alcohol, cigarettes, and drugs. It would be difficult for an adolescent to watch TV, go to a movie, watch a music video, read a book, or see a commercial without being inundated with pro-substances. Also the pro-marijuana/legalization debate is sending a disturbing mixed message to adolescents. (Partnership for a Drug-Free America, 1996)

The issue of the presence of faith or religion in an adolescent's life has been investigated to see if there was a significant relationship with drug use. Although a

significant relationship does appear to exist, it is a weak relationship. Religion was shown to be more closely related to alcohol use than drug use in young people. A significant finding in this research was the number one ranking those adolescents gave to the importance of religion in their life. It has been hypothesized that internal controls are having a deep influence on adolescents rather than the fear associated with church ideology or peer pressure coming from interactions with others of one's religious group. (Lorch and Hughes, 1985)

### **Why Adolescence Use Drugs**

Many studies have been conducted in order to examine what are the causes that lead to adolescent use of drugs and alcohol. It is commonly shared belief that if the causes can be discovered, there will be an antidote for the problem of adolescent drug use. One of the first big questions to be addressed is when do adolescents begin to use drugs. Research has shown that this occurs during transition periods, when a child is progressing from one developmental stage to another. The first major transition period in which this vulnerability is witnessed when adolescents advance from elementary school to middle school or junior high. This is generally the time of the first encounter with drugs. Many are faced with new challenges such as new social groups and larger groups of people. Many begin their experimentation at this time. (NIDA, 1997)

Unfortunately the fight against drug use is being lost by society. The studies have had conflicting results as to what and when in the life of an adolescent a drug education plan should be implemented. In a study conducted by Huetteman, Sarvela, and Benson, a

significant shift was noted in the attitudes of fifth graders in regards to alcohol and tobacco. It appears that the opinions of the peers becomes much more vital than the opinions of the parents. Another fact worth noting from this study is the fact that the students appeared to have minimal knowledge about the harm of substances other than tobacco and alcohol (Huetteman, et al, 1992.). This lack of knowledge could lead to a laissez-faire attitude in regards to harsher drugs, such as cocaine and marijuana, and the negative effects they could have. It should also be noted that recent research by Partnership for a Drug-Free America has indicated that today's youth are finding less risks and more benefits associated with marijuana use (Partnership for a Drug-free America, 1996)

Studies have been conducted to investigate the possible origins of drug use and how it progresses. In a study done by NIDA factors that affect possible drug use were discovered: 1) chaotic home environment, particularly in homes where parents abuse substances or suffer from mental illness 2) ineffective parenting, especially with children with difficult temperaments and conduct disorders 3) lack of mutual attachments and nurturing. Socialization factors that lead to drug use are: 1) inappropriate shy and aggressive behavior in the classroom 2) failure in school performance 3) poor social coping skills 4) affiliations with deviant peers 4) perceptions of approval of drug-using behaviors in the school, peer, and community environments. (NIDA, 1997)

Much research has been conducted in the area of predisposition to use drugs. A popular belief in these regards is that of the person-centered factors. The person-centered model assumes that the individual has some internal deficit in his/her ability to cope with stress created by problems. It is believed that this internal deficit increases a person's

susceptibility to drug abuse. Many possible internal deficits have been investigated but many believe that low self-esteem, depression, and anxiety to be the major contributors. Because low self-esteem, depression, and anxiety can create a large amount of psychological pain, it is hypothesized that adolescents with these deficits turn to alcohol and drugs as a way of alleviating the pain or negative feeling. (Blau et al., 1988)

According to research conducted by the National Center on Addiction and Substance Abuse at Columbia University, there are seven indicators of the risk of teen drug use. These were developed as a result of analysis of their yearly survey on attitudes in America on drugs. The more of these indicators that a teen exhibits, the higher the likelihood that the teen is to use drugs. The indicators include 1) the teen smokes 2) friends drink alcohol 3) friends use marijuana 4) has friends who uses acid, cocaine, or heroin 5) knows a drug dealer 6) can buy marijuana in a few hours or one day 7) states that he/she expects to use illegal drugs in the future. (CASA, 1996)

### **Drug Education**

As society has come to realize that the problem with drug use is getting worse, the realization that powerful steps must be taken has emerged. In many of today's school systems programs have been integrated as part of the curriculum of students. Although many believe that these programs are an asset, many question their effectiveness. Surveys of drug prevention programs have demonstrated a slight increase in knowledge, occasional shifts in attitudes, and rare changes in actual drug use. (Moskowitz, 1985).



However as a society we demand that positive action is developed to educate our children about drugs. In research conducted by Blum, it is pointed out that education would be more effective if it coincided with the stage of development in which adolescents begin to make significant use of legal drugs (such as tobacco and alcohol) and start to have significant contact with illegal drugs. (Blum et al., 1978) Discussing cocaine to an adolescent that is just starting to encounter pressure to use cigarettes will ultimately be wasteful.

Recently, much controversy has emerged as to the effectiveness of the current drug education that is offered to adolescence in schools. The most popular of these drug education programs is D.A.R.E. (Drug Abuse Resistance Education). But how effective has D.A.R.E been in the efforts to decrease substance use by today's youth? According to a recent evaluation commissioned by the U.S. Department of Justice, a meta-analysis of project DARE concluded, "D.A.R.E.'s limited influence on adolescent drug use behavior contrasts with the program's popularity and prevalence. An important implication is that DARE could be taking the place of other, more beneficial drug use curricula that adolescents could be receiving. D.A.R.E.'s core curriculum effect on drug use is slight and except for tobacco, is not statistically significant"(U.S. Department of Justice, 1995)

Suggestions have been formulated to assist in the drug education for adolescents. Focusing on the capabilities of young people, instead of the inabilities, developing awareness and responsibility in the decision making process, and to allow youths to participate as full members of society.

Alternatives to traditional drug education have been started in some schools across the country. In a 1984 study, a follow up was conducted on one such alternative drug education program. In a Northern California junior high school a drug education program was a source of a one-year follow up on their drug education program. In this program, decision-making was stressed as opposed to drug information, although this was also provided. Most of the class time was devoted to Lasswells' framework for understanding motives and needs. The research indicated that for 7th grade girls the results were immediate. However in 7th and 8th grade boys as well as 8th grade girls the course was not effective. (Moskowitz et al., 1984)

### **Gender Differences**

Research has demonstrated that gender lines also separate substance use and abuse. In a study conducted by Pascale, Trucksis, and Sylvester have found that females perceive a higher health risk in using illegal drugs. However, females have a high rate of amphetamine use. Based on the alarming increase in female anorexia, it has been hypothesized that the higher use of amphetamines in females is contributing to weight loss. (Pascale, et al., 1985)

Boys drink more alcohol and are more likely to use other drugs. Boys tend to drink more at all ages. It was also noted that the use of both alcohol and drugs was more likely in boys. However, both boys and girls who were involved in athletics were less likely to use alcohol and drugs than no athletes (Bush and Iannotti, 1993)

In regards to drug experimentation there are some differences in 12-17 year olds, girls are as likely to experiment with alcohol and illicit drugs, although boys are still more likely to become regular drinkers and users of illicit drugs. (Califano, 1998)

In regards of progression from use of legal drugs to illegal drugs, differences in the genders are seen. For males, progression to illicit illegal drug use was dependent on prior use of alcohol, whereas for females, either cigarette or alcohol use was dependent for progression to marijuana. (Kandel et al., 1992)

## **Trends**

The saying goes, “ Habits are hard to break”. Well this statement also refers to use of substances. Many of the original reasons that adolescents begin substance use, low self-esteem and poor coping skills, will follow them into their adult lives. (Jones and Heaven, 1998) If you want a good indicator as to whether a young adult is likely to use drugs, the best predictor is to look at what if any drugs he/she used in their adolescents. According to research conducted by Bachman, Wadsworth, O’Malley, Johnston, and Schulenberg, young adults who have left their drug use in their adolescence are more likely than other young adults to return to use in times of personal problems. The study goes on to discuss that many adolescents will start substance use as a form of rebellion against their parents; this rebellion will diminish when they mature and begin to accept responsibilities such as marriage and career. This is called the “ Marriage Effect” by many researchers. However, the use of drugs as a coping skill can re-emerge in times of personal strife. (Bachman, et. al., 1997)

Historically, we have seen the emergence of trends in all aspects of life. The world of substance use is no exception to this rule. Currently we are experiencing a re-emergence of psychedelic drugs, such as LSD. Many feel that this is not as a way of escaping the reality of life, as it was in the 1960's, but rather as a tool to have an expansion of awareness, a spiritual consciousness of the earth. (Taylor, 1996) No matter what the reason for the revival, psychedelics are back. However, the society at large has changed: there is a more liberal attitude about drugs especially experimentation, with the onset of new designer drugs that are synthesized in labs, has grown, the growing popularity of "raves". At these raves, there is a lethal combination of loud music, dancing, and large quantities of drugs, especially the psychedelic drug called Ecstasy. What amplifies this situation more is the fact that the United States still permits scientific research on these drugs even though they are of no medical use and have high abuse potential. This is a case of sending mixed messages to the youth of America.

### **Adolescent Attitudes**

All the research cannot change the alarming changes that are transpiring with today's adolescents when it comes to drugs. More teens are using drugs at a younger age. The once commonly accepted notion that drugs are bad is being replaced with the idea that the benefits outweigh the risks. More teens are stating that selling drugs is an acceptable way to make money. (Partnership for a Drug Free America, 1996)

The use of drugs is often described a spiral descent down. This can be illustrated in the "Gateway Effect". The idea behind this is that a large percentage of illicit drug

users and addicts often begin their use with alcohol and tobacco. In many studies marijuana is often included in this grouping. They are called gateway drugs because they are the beginning or the gateway to more addictive and powerful illegal drugs. Research has shown that if someone has ever smoked or drank, they are 65 times more likely to move on to marijuana. The risk of moving on to cocaine is 104 times higher for someone who smoked marijuana at least once than a person who never did (NIDA, 1997). Many will take the next step in drug use based on the fact that they have crossed a boundary when they decided to smoke cigarettes, so how bad is taking a drink. Now that they have taken a drink, how bad is one marijuana cigarette. The attitudes of adolescents will modify according to each level or boundary they cross over.

The National Center on Addiction and Substance Abuse at Columbia University (CASA) conducts a yearly survey on the changing attitudes of American teens on substance abuse. In this survey 1200 teenagers between 12-17 years old were surveyed by telephone during July and August of 1996. The margin of error for the teenagers is +/- 2.8. According to the 1996 results that the number of teens who expect to try illegal drugs in the future has doubled since 1995. CASA also reports dramatic changes in the attitudes about illegal drugs including: 1) 28% of 12 year olds say their schools are not drug free, 69% of 17 year olds state going to schools where students keep, use, and sell drugs. 2) 4% of 12 year olds say it is "very likely" that they will try drugs in the future; 20% of 17 year olds have this same expectation. 3) 19% of 12 year olds can buy marijuana within hours (CASA, 1996)

## **Summary**

It has become very obvious that much research has been devoted to the subject of adolescent alcohol and drug use. But with all the knowledge that we have obtained about why, when, and for what reasons they use, we have not been able to answer the single most important question. That question is how do we get the kids to not use addictive substances at all. Through my experiment I hope to get a small glimpse in the mind and more importantly, the attitudes of adolescents. The thoughts and beliefs that motivate their behavior are paramount to any battle we fight in their behalf.

### **Chapter 3: Design of The Study**

#### **Sample:**

The students that were used to collect this data were all students at St. Bridget's Regional School. Students were all in grades ranging from Fifth grade to Eighth grade. The sample population was comprised of 39 females and 46 males, 15 students were in fifth grade, 20 students were in sixth grade, 26 students were in seventh grade, and 24 students were in eighth grade. All students are residents of Gloucester County, New Jersey. All subjects had been participants in D.A.R.E., which was given to students through Fifth Grade. Subjects were picked based solely on the fact that they were students in the designated grade levels. Subjects were excluded from the study based upon lack of consent from parent or legal guardian. Results can be seen below in table 3.1.

**Table 3.1**

**Frequencies of Gender**

	Frequency	Percent	Valid Percent	Cumulative Percent
<b>Female</b>	39	45.9	45.9	45.9
<b>Male</b>	46	54.1	54.1	100.0

**Frequencies of Grade Levels**

	Frequency	Percent	Valid Percent	Cumulative Percent
<b>Fifth</b>	15	17.6	17.6	17.6
<b>Sixth</b>	20	23.5	23.5	41.2
<b>Seventh</b>	26	30.6	30.6	71.8
<b>Eighth</b>	24	28.2	28.2	100.0

**Measure:**

To measure the attitudes of the students, the Youth Attitude Survey was utilized. The Youth Attitude Survey was formulated by Columbia University in order to examine how attitudes of adolescents correlate to risk of possible future drug use. The scale



consists of 69 questions with emphasis on not only attitudes about drugs, but also examining the background of the students, such as family background. Areas of noted significance in establishing risk for future drug use are:

- 1) Student and parents attitudes in regard to the harmfulness/harmlessness of marijuana
- 2) How easy a student states buying marijuana is
- 3) Students' friends involvement with alcohol, cigarettes and marijuana
- 4) Students current use of alcohol, marijuana, and cigarettes
- 5) Whether or not a curfew is imposed on a student
- 6) If the family has dinner together and if so, how often
- 7) Grades that student receives in school
- 8) The religious involvement of the student and their family.

### **Design:**

The study was originally designed to be performed as a telephone survey for both teens and parents of teens. It has been designed to determine the correlation between the attitudes of teens and their parents and probability for future drug use. The survey was also designed to account for various demographic aspects of the teens and their parents/families.

The study was a descriptive measurement. Due to the nature of the survey descriptive statistics were utilized, such as frequencies, means, and cross tabulations. The

study was designed in the hope of acknowledging areas of possible impetus for future drug/alcohol use. With this knowledge, drug education could be formulated to address these problem areas.

### **Procedure:**

Dialogue was established with the Principal of St. Bridget's Regional Grammar School. The purpose of the survey and student population that was necessary was explained to the Principal. A copy of the survey was forwarded to the school and reviewed by the Principal and the teachers of grades 5-8. The consensus of the principal and participating faculty was the survey needed to have three questions removed that they believed were not consistent with Catholic School morality. It was agreed that the three questions would be removed. A consent form was formulated and distributed to the student body of Grades 5-8. The day to conduct the survey was selected by the School Principal based on other activities that were taking place including administering Iowa testing to the entire student body. The student was informed when the testing was to be completed and what the subject matter was their opinion on drugs and drug use.

The day of the testing students were progressing through the ritual of their typical day. Testing was to begin at 9:00 am. The testing was completed in the student's regular classrooms and was monitored by their classroom teachers. The students who had not received permission from their parents/legal guardian were either sent to another part of the school (i.e. library) or remained in the classroom and completed individual work.

Students were permitted to ask questions throughout their testing period. No time limit was set. Testing was completed in approximately 35 minutes.

### **Restatement of Hypothesis:**

Students' attitudes will change between fifth and eighth grade in regard to areas of drugs and drug use as manifested by selected risk factors, both controlled and non-controlled. There will be a negative increase in controlled factors as grade level increases.

### **Null Hypothesis:**

There will be no difference in attitudes about drugs and drug use between students in grades 5-8 where there is drug education, as manifested by selected controlled risk factors.

### **Variables:**

The design of the study is descriptive. Scores were derived from the Youth Attitude Survey. This survey was created by the National Center on Addictions and Substance Abuse at Columbia University (CASA) in 1995. The impetus for the survey

was to examine public attitudes toward illegal drugs and substance abuse. The survey was developed based on the CASA thesis, substantiated by other research, that addiction has its roots in adolescence. The belief was that if you can get child through the age of twenty-one substance free, then the child had come through adolescence unscathed by drugs and would be more likely to continue that trend throughout life.

The Youth Attitude Survey contains 69 questions, 67 are closed questions and 2 questions are open questions requiring the student to independently supply the answer. The survey not only addresses issues directly related to drug use but also examines the backgrounds of the students.

## **Chapter Four: Analysis of Results**

### **Restatement of Hypothesis:**

The hypothesis was that there would be a difference in the attitudes on drugs and drug use between students in grades 5 through 8 as manifested by selected controlled risk factors. There will be a negative increase in the controlled risk factors as the grade level increases.

### **Interpretation of the Results:**

The study yielded descriptive statistics, as well as frequencies in regards to the results of the survey. Of the students that were surveyed, the number of total students was 85; of this 85 students 39 were female (45.9%) and 46 were male (54.1%). The grade distribution is as follows: 15 students were in grade 5 (17.6%), 20 students were in grade 6 (23.5%), 26 students were in grade 7 (30.6%), and 24 students were in grade 8 (28.2%).

The risk factors that were examined were comprised of both controlled and non-controlled risk factors. The controlled risk factors were based purely upon the opinions and beliefs of the students, such as future use, legalization of marijuana, and the personal decision to report a person using or selling drugs. The non-controlled risk factors were

things that were often environmental or based on the students' background such as, family dynamics, parents' drinking and marijuana use, and amount that the family unit has dinner together.

One of the selected risk factors that were to be examined was amount of participation in a religious organization or service. In the study group, students reported on their individual attendance at a religious service in the course of a month. A significant amount of students (69.4%) did report that they attended some type of religious service at least once a week. The students in Fifth grade had the lowest percentage of weekly or more attendance at a church service (53.3%). They would have the greatest risk factor for future drug use based on this characteristic. Attending church services one time of month was the response of 15.3% of the students and 30.6 % of the students surveyed reported that they attended church services 1-3 times in the course of the month. The results can be seen below in Table 4.1.

**Table 4.1**  
**Cross Tabulation of Church Service Attendance and**  
**Grade Level**

	<b>Times attended church/religious service in a month</b>				
	<b>Once</b>	<b>1-3 times</b>	<b>Weekly</b>	<b>More than weekly</b>	<b>Total</b>
<b>Grade 5</b>	2	5	5	3	15
<b>Grade 6</b>	13	2	17	1	20
<b>Grade 7</b>	7	1	17	1	26
<b>Grade 8</b>	4	5	15	0	24

In the group of students, 78.8% live in a household with two parents, no stepparents. The remaining students, 21.2 %, identified that they lived in a household with either one of their biological parents and a stepparent or lived alone with one of their biological parents. The students in grade six had the lowest percentage of students that live in a household with both biological parents (65%). The remaining grade levels all scored 80% or higher on this question. The results can be viewed in Table 4.2.

**Table 4.2**  
**Cross Tabulation of Parental Living Arrangements**  
**and Grade Level**

	<b>Grade 5</b>	<b>Grade 6</b>	<b>Grade 7</b>	<b>Grade 8</b>
<b>Two Parent home</b>	12	12	22	20
<b>Two Parent home, Stepparent</b>	0	3	0	1
<b>One Parent, Mother</b>	1	3	2	2
<b>One Parent, Father</b>	0	1	1	0
<b>No Parent, other</b>	2	0	0	1

In our study, the mean rank of times a student had dinner with his/her family was 5.4824 with a standard deviation of 2.1910 (See Figure 4.3). According to the selected risk factors established by C.A.S.A., children who eat dinner less than 6-7 times a week are considered at risk. The mean of the students in the survey group would demonstrate a significant risk for future drug use. Of the grade levels examined, the students in the sixth grade posted the most significant scores for this risk factor (69.2%) Of the group of students surveyed, 60 % had dinner less than 6 times a week with their family. Results can be viewed below in Table 4.4.



**Table 4.3**

**Mean Ranks for Dinner with Family**

	N	Minimum	Maximum	Mean	Standard Deviation
Number of Family Dinners	85	1.0	8.0	5.4824	2.1910

1.0 = no nights

8.0 = seven nights

**Table 4.4**

**Cross Tabulation of Nights of Dinner with Family and Grade Level**

	Grade 5	Grade 6	Grade 7	Grade 8
No Nights	1	0	2	3
One Night	1	1	1	1
Two Nights	3	1	2	3
Three Nights	0	2	4	2
Four Nights	2	1	2	3
Five Nights	1	4	7	4
Six Nights	0	5	4	6
Seven Nights	7	6	4	2
% At risk	53.3%	45%	69.2%	66.7%

Past and present behavior of an adolescent's parents is also viewed as a risk factor for future drug use. Students' knowledge/belief that a parent smoked marijuana as a youth is considered to be a risk factor. A significant number of students (76.5%) stated that they did not know if either of their parents had ever smoked marijuana. The results of that question would be insignificant in determining a risk factor. Results can be seen below in Table 4.5. In our survey, the largest percentage (37.6%) of students report that they view their parents as non-weekly drinkers. This was closely followed by the group that reported that their parents didn't drink (32.9%). In all grade levels the risk categories, (2 or more drinks a day, 2 drinks a day, or one drink a day) had few respondents. The students in grade 5 had 13.3% students with risk, of the students in Grade 6, 10 % of the students would be at risk, 11.5% of the students in grade 7 would be considered a risk, and of the students in Grade 8, 33% of the students would be at risk. Results can be seen below in Table 4.6

**Table 4.5**

**Cross Tabulation of Student Knowledge of their Parents' Marijuana**

**Use and Grade Level**

	<b>Grade 5</b>	<b>Grade 6</b>	<b>Grade 7</b>	<b>Grade 8</b>
<b>Yes, I think one/both of my parents used Marijuana in the past</b>	1	0	4	5
<b>No, I don't think one/both of my parents used Marijuana in the past</b>	1	1	3	5
<b>I don't know if either of my parents used Marijuana in the past</b>	13	19	19	14

**Table 4.6**

**Cross Tabulation of Parent Drinking and Grade Level**

	<b>Grade 5</b>	<b>Grade 6</b>	<b>Grade7</b>	<b>Grade 8</b>
<b>More than two drinks a day</b>	1	1	0	3
<b>Two drinks a day</b>	0	0	0	2
<b>One drink a day</b>	1	1	3	3
<b>Weekly drinker</b>	1	2	2	5
<b>Non-weekly drinker</b>	6	6	13	7
<b>Never drinks</b>	6	10	8	4

Willingness to report a person that is using or selling drugs is one of the selected risk factors that were examined in this study. This is a controlled risk factor. In the study that was conducted, 61.2% of the students stated that they would report a person if they saw them using drugs and 38.8% stated that they would not report them. The percentage of students that would not report a person using drugs (considered the risk factor) went up as the grade level went up. This is in agreeance with the hypothesis. The results for the question in regards to reporting someone who is selling drugs had similar results. If a student witnessed someone selling drugs, 71.8% would report them as opposed to 28.2% would not report them. Results can be seen in Table 4.7.

**Table 4.7**

**Cross Tabulation of Reporting: Using Drugs and Grade Level**

	Grade 5	Grade 6	Grade 7	Grade 8
<b>Yes, I would Report</b>	11	14	17	10
<b>No, I would not Report</b>	4	6	9	14
<b>Percentage at risk</b>	26.6%	30%	52.9%	58.3%

**Table 4.8**

**Frequency of Reporting: Selling Drugs**

	Grade 5	Grade 6	Grade 7	Grade 8
<b>Yes, I would Report</b>	13	17	17	14
<b>No, I would not Report</b>	2	3	9	10
<b>Percentage at risk</b>	13.3%	15%	34.6%	41.7%

Students were questioned about if they thought they would use drugs or any addictive substance in the future. This is considered a controlled risk factor. A cross tabulation was performed to measure grade level and the response to this question. (See Figure 4.9). Seventh grade students had the largest percentage of responses that indicated they believed they would use drugs in the future (34.6%). The Percentage of females that responded yes to future drug use was 30.76% as opposed to only 17.39% of males responding yes to future drug use. The results can be seen below in Table 4.10.

**Table 4.9**

**Cross-tabulation of Belief of Student that they will Use Drugs in the  
Future And Grade Level**

	Future		Percentage at risk
	Yes	No	
<b>Grade 5</b>	0	15	0.0%
<b>Grade 6</b>	4	16	20%
<b>Grade 7</b>	9	17	34.6%
<b>Grade 8</b>	7	17	29.2%

**Table 4.10**

**Cross-Tabulation of Gender of Student and with Student's belief that  
they will use drugs in the Future**

	Gender		Total
	Female	Male	
<b>Yes, I think I will use in the Future</b>	12	8	20
<b>No, I don't think I will use in the Future</b>	27	38	65

A cross tabulation was also performed to measure grade level of students and their responses to whether drugs should be legalized or not. The results demonstrated that the largest percentage of a grade that believed that marijuana should be legalized is grade eight (54.2%) This was closely followed by the fifth grade students, in which 53.3% stated that they felt that marijuana should be legalized. (See figure 4.11)

**Table 4.11**

**Cross- Tabulation of Belief that Marijuana Should Be Legalized and**  
**Grade Level**

	Legalize		Percentage at risk
	Yes	No	
<b>Grade 5</b>	8	7	53.3%
<b>Grade 6</b>	8	12	40%
<b>Grade 7</b>	8	18	30.7%
<b>Grade 8</b>	13	11	54.2%

## **Chapter 5: Summary and Conclusions**

The National Center on Addictions and Substance Abuse at Columbia University (CASA) has identified several characteristics of teenagers, which are associated with lower risk of drug use. These characteristics are correlated to various questions that are contained in the Youth Survey Questionnaire that was distributed to the students in this study. Providing that students answer these questions honestly, a glimpse of possible future drug use can be obtained when looking at these questions. It should be noted that this is merely an indicator; it is not a flawless measuring tool. Human behavior, although often predictable, is still controlled by each person's free will.

The risk factors are a combination of opinions of the student and historical data of their family (times they have dinner together, parents past drug involvement). Issues that concerned directly the opinions of the student were critical to this paper. These were the controlled risk factors. One of the risk factors that is based purely on the opinions of the student is the question of reporting a person if they are using or selling drugs. In both areas (selling and using), there was increase in the risk factor as the grade level increased. The risk is related to if the student reported that they would not turn a person in for using or selling. This could be related to the increasing need for peer acceptance,

as an adolescent gets older. Many would consider it “uncool” to turn someone in for using or selling drugs.

Another opinion-based risk factor is if the student believed that they would use addictive substances in the future. In the study group, there were 0.0% of Fifth grade students who stated that they would use drugs in the future. This could possibly be explained by the fact that these students are in their last year of the D.A.R.E. program and the major emphasis is on “Just say no”. The percentages of the seventh grade students were the highest percentage for stating they would use drugs in the future (34.6%). Also noting the dramatic increase in the amount of students that felt they would use drugs in the future, raises the question of whether or not programs like D.A.R.E. fail students simply based on the fact that it is discontinued after Grade 5. Do the problems with drugs stop at Grade 5?

Involvement in religion and religious life has been identified as one of these characteristics. In the study, 69.4 % of the students responded that they attended church services at least once a week or more. This would be considered a positive characteristic in fighting future drug use. This is a non-controlled risk factor. However, it should be noted that all student completed the survey were attending a Roman Catholic Grammar School. This could contribute to the presence of religious service in some of the students’ life. Also, the choice of whether to attend church service or not is questionable; are the students attending because they chose to attend or are it a pre-existing family tradition?



It has been advocated by many, that the more stable the family life of an adolescent, the less likely that adolescent is to use drugs. According to the students in this survey, 78.8% live in a home with both biological parents. This would represent a positive characteristic in remaining free of drugs. Having dinner as a family unit at least 6-7 times a week is a characteristic of an adolescent least likely to use drugs. All grade levels appeared to have high percentage that would be at risk. The seventh grade students had the highest percentage with 69.2% of the students being at risk. The students in our survey would be considered at risk to use based on this statistic.

The influence of parents on their children's' future is seen in the characteristics. It is noted that parents who used marijuana as a youth have a greater risk of having children who will also use drugs. This is stated in the research of Bush and Iannotti, who demonstrated a strong correlation between parents who use addictive substances and children who use addictive substances (Bush and Iannotti, 1993). This directly relates to the theories of Albert Bandura on modeling. If children see that their parents smoke and drink, it will make an impression that this is acceptable and often times, future behavior for them. When a son/daughter sees a parent come home from work very stressed out, they do notice if the coping mechanism they turn to is alcohol/cigarettes. It sets the groundwork that this is an acceptable way of dealing with stress. In our survey this information was obtained from the adolescents. It was based upon the students' ideas of whether they believed/ or thought that either of their parents had used marijuana when they were younger. It would be more effective to ask the parents themselves, rather than base it on speculation of the children. This also stresses the importance of continuing education in the area of drug prevention. If students are taught health coping mechanisms

and ways to deal with peer pressure, they could counter balance negative examples they may encounter at home.

Another matter in which a parent has an influence on their children is in the area of drinking. As stated earlier in the paper, alcohol is considered by many to be a gateway drug and should therefore be considered a danger if not handle properly when educating adolescents. Although it is not being said that parents should not drink, be aware of the message that is being sent to adolescents. Parents may not realize the impact their actions have on their children's cognitive and social development. Of particular note was a student's response to the question pertaining to if they think their parents smoked marijuana when they were younger. The student stated that he believes that both parents smoked marijuana when they were younger. The interesting aspect to the answer was that the student wrote as a sidebar that one of the parents has stopped smoking marijuana. The implication was that he/she believed that one of his/her parents was continuing to smoke marijuana. This sends as mixed message to the student in regards to what decisions they will make in regards to smoking marijuana in their future.

## **Conclusions**

The purpose of this study was to examine whether students attitudes about drugs and drug use would change in students between Fifth and Eighth grades. The students did demonstrate a negative increase in many controlled risk factors. This

information was obtained by administering the Youth Attitude Survey to 85 students, ranging in ages from 10-14 years old. The results were studied in terms of descriptive statistics, comparing them to established risk factors for future use.

## **Discussion**

How do we get adolescents to stop using drugs, better yet, how do we get them to never start using drugs? That is a question that has been asked by anyone who has had a child in his or her life. Unfortunately, a definitive answer has not yet been found. We do know that the attitudes that adolescents form on this area will have a strong impact on their decision to use drugs or not in their future. This study did examine the attitudes of students in a Roman Catholic Grammar School.

In the area of legalization of marijuana, the percentage of students that believed it should be legalized was high. The influence of peer groups may have a large impact on this statistic. Just as the effect of peers on positive aspect of behavior was seen in the research conducted by Black, the reverse is also true (Black et al., 1998). If students begin seeing more of their peer and peer group involved in drugs, they will begin to view drugs, in this case marijuana, as a part of everyday life. Although the student himself may not choose to use marijuana, he will become desensitized to the impact and potential danger that is related to marijuana. In the eyes of many students, marijuana is no more dangerous than

cigarettes. If this is so, cigarettes are legal and therefore marijuana should be as well. Welcome to the wonderful world of rationalization. This is the hook that will entangle many adolescents in the world of addictive substances.

There is no one single group of people or one particular organization that is solely responsible for the welfare of the adolescents in the world. As our country struggles to deal with the unfolding tragedy that occurred in Littleton, Colorado on April 20, 1999, we begin to realize the depth of pain that many of our adolescents and youth adults are in. Instead of pointing fingers and assigning blame, we need to unite as a society to help the children of the world. It is a world of much temptation and confusion, yet it offers so much hope and promise. We, as a society, need to guide and mentor our children. We need to enlighten them to the beauty and joy that they can get from simply living. Part of this enlightening will be through modeling the appropriate behavior, part will come from educating them about drugs and addiction, and the hardest part for many will be the giving of themselves and their time. Drugs are a plague that is besieging the youth of America and the current approaches of Drug Education are not making significant headway in the battle to save our children. It is time that consistency is developed between all in this battle.

### **Implications for Future Research**

The research on the areas of drugs, drug use, and the youth of society is plentiful. But for all the research that has been conducted, the main questions

remain unanswered. The devastation that has been caused by drugs has been felt in all socioeconomic aspects of society. We realize that the effects that the drug culture has on our society, but what we don't know is how to disarm this culture.

Research has illustrated that drugs are affecting children at younger ages. ( Hutchinson and Little, 1985) Many believe that this is part of the fault with programs such as D.A.R.E. More research on the area of students knowledge base about drugs would be helpful. It is counterproductive to be addressing children on a level that is far below where their knowledge level is. Curriculum needs to be based on their level of knowledge. Although difficult to accept, ten-year-old children are well versed in drug knowledge and we need to teach accordingly.

The idea that many drug education programs stop at Fifth Grade is quite disturbing. After reviewing the study it became clear to me that Drug Education and Prevention programs need to be a consistent part of an adolescents' entire educational experience. It was clear that the controlled risk factors increased as their age and grade level increased. This is also related to the years that they are without formal drug education and prevention programs.

Research needs to be continued in the area of youth run drug education. There is a portion of society that is comprised of adolescent and young adult recovering addicts. There has been some research to indicate that peer run intervention groups did have a positive effect on students who participated. (Black et al., 1998) This research needs to be expanded, possibly looking at support groups to help adolescents as they struggle with possible drug use and peer pressure.

The population that we strive to serve is best suited to tell us what they think and need. But we, as adults, need to listen and incorporate their thoughts into any Drug Education curriculum.

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## **Appendix A**

February 23, 1999

Dear Parents,

My name is Denise Pierce and I am writing this letter seeking your help in a very important matter. I am currently completing work on my Master's thesis at Rowan University in the area of School Psychology. As part of my thesis I am required to conduct research to support my hypothesis. I had inquired to Mrs. Dickerman if it was possible to utilize some of the students at St. Bridget's to assist me in this task. Mrs. Dickerman very graciously agreed to assist me. The students in grades 5-8 will be given a short survey to complete. The subject of the survey is adolescent attitudes about drugs, including alcohol and cigarettes. This survey was developed at Columbia University and has been used across the United States in order to gain data on this important area. However, I will also need the permission of the parents of each student that I will engage in this survey. The responses of the students will help supply the data I need to complete my Master's work. The survey has been reviewed by Mrs. Dickerman and several of the faculty. Enclosed is a consent form for your review. I would need this returned to your students' teacher in order for them to participate in this study.

If you should have any questions, please feel free to contact me at home, 881-8223. You may also contact my advisor at Rowan University, Dr. Roberta Dihoff at 256-4000. I will be sharing my results with Mrs. Dickerman and would be happy to discuss them with any of the parents as well.

Thank you in advance for your help in this matter.

Sincerely,

Denise Pierce

## **Appendix B**

### **CONSENT FORM**

I, Being the Parent /Legal Guardian Of \_\_\_\_\_  
( print child's full name), give permission for the Youth attitude survey to be administered to my child. I realize that this is an anonymous test and my child's responses are confidential. I understand that this survey is being conducted as part of A Graduate Thesis and will be examining students' attitudes about drugs and drug use.

I give permission to the researcher to use the results of the survey and additional demographic data collected in the study. I also give permission to the researcher to share the results of the survey with the administration and professional staff at St. Bridget's School.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Relationship to child

\_\_\_\_\_  
Date

## **Appendix C**

## **YOUTH SURVEY QUESTIONNAIRE**

1) What is your age and current grade level?

\_\_\_\_\_ Age \_\_\_\_\_ Grade level

2) Gender

\_\_\_\_\_ Female

\_\_\_\_\_ Male

3) What is the most important problem facing people your age- that is, the thing which concerns you the most?

\_\_\_\_\_ Crime and Violence in School

\_\_\_\_\_ Other Crime and Violence

\_\_\_\_\_ Social pressures ("Fitting In" and Popularity)

\_\_\_\_\_ Jobs/Opportunities

\_\_\_\_\_ Getting along with Parents/ Other problems at home

\_\_\_\_\_ Drugs/Alcohol/Tobacco

\_\_\_\_\_ Sexual Issues

\_\_\_\_\_ Doing Well in School

\_\_\_\_\_ Getting into College

\_\_\_\_\_ Other \_\_\_\_\_

4) Would you say right now you have specific goals for your future, in terms of career, or family, or lifestyle, when you finish school, or not?

\_\_\_\_\_ Have specific goals

\_\_\_\_\_ Don't have specific goals

5) After you finish school, do you think it will be easier or harder for you to achieve your goals than it was for your parents when they were just starting out, or will it be about the same?

\_\_\_\_\_ Easier

\_\_\_\_\_ Harder

\_\_\_\_\_ About the same

6) Is there something you do, an activity or hobby or a sport, that you really care about? If yes, what is it?

\_\_\_\_\_  
\_\_\_\_\_

7) On an average weekend, do you often get bored because you don't have enough to do, or not?

\_\_\_\_\_ Yes, I often get bored

\_\_\_\_\_ No, I don't often get bored



8) Thinking now about your own close circle of friends, how many of your friends smoke at least one cigarette a day

- ☐ None
- ☐ Less than Half
- ☐ More than Half
- ☐ All of Them

9) Do you currently smoke, meaning one or more cigarettes a day? Roughly how many cigarettes or packs do you smoke? Have you ever smoked?

- ☐ Less than one cigarette a day
- ☐ 1-5 cigarettes per day
- ☐ 1/2 pack per day
- ☐ 1 pack per day
- ☐ 1 1/2 packs per day
- ☐ 2 or more packs per day
- ☐ Not currently a smoker, but smoked in the past
- ☐ not currently a smoker, never smoked

10) Do you think that smoking cigarettes helps you to control your weight?

- ☐ Yes
- ☐ No

11) How do you get cigarettes?

- ☐ Friends buy them for me
- ☐ I bum them from friends
- ☐ I buy them from a store that does not ask for ID
- ☐ I buy singles or loosies from a store that doesn't ask for ID
- ☐ I get them from older brothers or sisters
- ☐ Other \_\_\_\_\_

12) Which is the easiest for someone your age to buy: cigarettes, beer, or marijuana?

- ☐ Cigarettes
- ☐ Beer
- ☐ Marijuana
- ☐ They are the same

13) And which is hardest to stop using: cigarettes, beer and alcoholic beverages, or marijuana ?

- ☐ Cigarettes
- ☐ Beer and alcoholic Beverages
- ☐ marijuana
- ☐ They are the same

14) And which is the most harmful to one's health: cigarettes, beer and alcoholic beverages, or marijuana?

- ☐ Cigarettes
- ☐ Beer

- ☐ Marijuana
- ☐ They are the same

15) Do either of your parents currently smoke at least one cigarette a day? Do both parents?

- ☐ I have one parent who is a smoker
- ☐ Both of my parents are smokers
- ☐ Neither parent smokes
- ☐ I don't know

16) Do you personally know someone -- a friend or a classmate -- who has a problem with drinking too much alcohol?

- ☐ Yes
- ☐ No

17) Thinking now about your own close circle of friends, how many of them currently drink beer or other alcoholic drinks pretty regularly, like most weekends -- none, less than half, all of them?

- ☐ None
- ☐ Less than Half
- ☐ More than Half
- ☐ All of them

18) In a typical week, will either of your parents drink wine, beer, or another alcoholic beverage? In a typical day, will they have one, two, or more than two drinks? Does either parent drink?

- ☐ More than two drinks a day
- ☐ Two drinks per day
- ☐ One drink per day
- ☐ Weekly drinker (Less than one per day)
- ☐ Non-weekly drinker( No drinks typical week, will drink)
- ☐ Never drinks
- ☐ Don't know

19) In a typical week, will you drink beer, wine, or another alcoholic beverage? In a typical day, will you have one, two, or more than two drinks? Do you ever drink beer or other alcoholic beverages?

- ☐ More than two drinks per day
- ☐ Two drinks per day
- ☐ One drink per day
- ☐ Weekly drinker( less than one per day)
- ☐ Non weekly drinker( No drinks typical week, will drink)
- ☐ Never drinks

20) How many drinks can someone have in an afternoon and still drive a car safely?

- ☐ None
- ☐ One
- ☐ Two

- ☐ Three
- ☐ 4 or more
- ☐ Depends on circumstances

21) How many marijuana joints can someone smoke in an afternoon and still drive a car safely?

- ☐ None
- ☐ One
- ☐ Two
- ☐ Three
- ☐ Four or More
- ☐ As Many as they want
- ☐ Depends on circumstances

22) Does the regular use of beer, wine, or other alcoholic beverages affect how someone your age does in school: do grades usually improve, worsen, or do they not change? Do they improve/worsen a great deal or somewhat?

- ☐ Improve a great deal
- ☐ Improve somewhat
- ☐ Worsen somewhat
- ☐ Worsen a great deal
- ☐ Don't change at all

23) Does the use of beer, wine, or other alcoholic beverages seem to affect how often someone your age gets into trouble: is it more likely or less likely that someone who drinks would get into trouble, or does it make no difference? Is that much( more/less) likely or somewhat( more/less) likely?

- ☐ Much more likely
- ☐ Somewhat more likely
- ☐ Somewhat less likely
- ☐ Much less likely
- ☐ No difference at all

24) Does the regular use of marijuana seem to affect how someone your age does in school: do grades usually improve, worsen, or do they not change? Do they improve/worsen a great a great deal or only somewhat?

- ☐ Improve a great deal
- ☐ Improve somewhat
- ☐ Worsen a great deal
- ☐ Worsen somewhat
- ☐ Don't change at all

25) Does the use of marijuana seem to affect how often someone your age gets into trouble; is it more likely or less likely that someone who uses marijuana would get into trouble, or does it make no difference?

- ☐ Much more likely
- ☐ Somewhat more likely

- ☐ Somewhat less likely
- ☐ Much less likely
- ☐ No difference at all

28) Thinking now about your own close circle of friends, how many of them currently use marijuana-- none, less than half, more than half, all of them?

- ☐ None
- ☐ Less than Half
- ☐ More than Half
- ☐ All of Them

29) Do you personally know someone-- a friend or a classmate-- who has a serious problem with the use of illegal drugs? Do you have more than one?

- ☐ Yes, more than one
- ☐ Yes, just one
- ☐ No

30) Have you ever personally witnessed the sale of illegal drugs in your own neighborhood, or not?

- ☐ Yes, I have witnessed drugs being sold in my neighborhood
- ☐ No, I have not witnessed the sale of drugs in my neighborhood

31) Have you ever felt pressured by someone to use marijuana or another illegal drug? Was that person a boy or a girl?

- ☐ Yes, Boy
- ☐ Yes, Girl
- ☐ No

32) Have you ever felt pressured by someone to drink beer or another alcoholic beverage? Was that person a boy or a girl?

- ☐ Yes, Boy
- ☐ Yes, Girl
- ☐ No

33) Has anyone ever offered to sell or share marijuana with you? Was that person a boy or a girl?

- ☐ Yes, Boy
- ☐ Yes, Girl
- ☐ No

34) Can you name a household product which someone your age might use to get high?

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35) Among your classmates and other kids your age, how widespread is inhaling or "huffing" household products to get high: is it.....

- ☐ Very widespread
- ☐ Fairly widespread
- ☐ Fairly rare
- ☐ Very rare

36) Do you know a friend or classmate who has used harder drugs like acid, cocaine, or heroin? Do you know this person fairly well, or not too well?

- ☐ Yes, I know someone fairly well
- ☐ Yes, I know someone not well
- ☐ No

37) Generally speaking, do you feel your school is a safe place to be or not a safe place?

- ☐ Safe
- ☐ Not safe

38) Is your school a "drug-free" school or is it not "drug-free", meaning some students keep drugs, use drugs, or sell drugs on school grounds?

- ☐ School is drug-free
- ☐ School is not drug-free

38) Would making your school truly "drug-free" make things better at your school, or would it not make much of a difference?

- ☐ Would make it better
- ☐ Would not matter

39) Who is most responsible for your school being drug-free or not drug-free: the principal, the police, teachers, parents, students, or society at-large? ( Chose only one)

- ☐ The principal
- ☐ The police
- ☐ The teachers
- ☐ The parents
- ☐ The students
- ☐ Society at-large

40) If a group of students at your school promised not to smoke, drink, or use illegal drugs at school for the entire school year, would you be willing or not willing to join them in making that pledge?

- ☐ Willing
- ☐ Not willing

41) If you personally saw a student using/selling illegal drugs at school, would you report the student to school officials or not?

**USING**

**SELLING**

\_\_\_\_ would report them  
 \_\_\_\_ would not report them

\_\_\_\_ would report them  
 \_\_\_\_ would not report them

42) Listed below are some possible things someone your age may get out of using drugs. Please check those which you think is the main reason kids use drugs.

\_\_\_\_ Relieves stress and boredom  
 \_\_\_\_ They think they are cool doing drugs  
 \_\_\_\_ They want to do what their friends do  
 \_\_\_\_ It's a way of rebelling against being told what to do  
 \_\_\_\_ They have a serious personal problem  
 \_\_\_\_ There's alcohol or drug abuse in the family  
 \_\_\_\_ It makes them feel good

43) Do you know anyone who sells illegal drugs?

\_\_\_\_ Yes  
 \_\_\_\_ No

44) If you wanted to buy marijuana right now, how long would it take you: in a few hours, within a day, within a week, longer than a week, or would you be unable to buy it?

\_\_\_\_ In a few hours  
 \_\_\_\_ Within a day  
 \_\_\_\_ Within a week  
 \_\_\_\_ Longer than a week  
 \_\_\_\_ Would be unable to buy it

45) Do you favor or oppose the legalization of marijuana meaning ending the laws against having and using marijuana? Is it.....

\_\_\_\_ Strongly favor  
 \_\_\_\_ Somewhat favor  
 \_\_\_\_ Somewhat oppose  
 \_\_\_\_ Strongly oppose

46) How much do movies encourage people to smoke cigarettes: a great deal, a fair amount, not very much, or not at all?

\_\_\_\_ A great deal  
 \_\_\_\_ A fair amount  
 \_\_\_\_ Not very much  
 \_\_\_\_ Not at all

47) How much does the popular music you listen to and music videos you watch encourage the use of marijuana and other illegal drugs: a great deal, a fair amount, not very much, or not at all?

\_\_\_\_ A great deal  
 \_\_\_\_ A fair amount  
 \_\_\_\_ Not very much  
 \_\_\_\_ Not at all

Do you think American culture -- I mean, movies, music, TV, fashion -- glamorizes:

48) smoking cigarettes?

- ☐ Does  
☐ Does not

49) drinking alcohol?

- ☐ Does  
☐ Does not

50) using illegal drugs?

- ☐ Does  
☐ Does not

51) women and girls being quite thin?

- ☐ Does  
☐ Does not

52) What is the biggest reason people your age do not use illegal drugs:

- ☐ They are afraid of getting caught  
☐ Drugs reduce performance in school or sports  
☐ They are afraid of being permanently damaged or getting hooked  
☐ It would disappoint their parents or teachers  
☐ Because their friends don't use drugs  
☐ Because they think it's morally wrong

53) Have you ever had a discussion with your parents about the risks of using illegal drugs? If no, would you like to have a discussion with your parents about illegal drugs?

- ☐ Yes  
☐ No/ would like to have one  
☐ No/would not like to have one

54) Do you think either of your parents smoked marijuana when they were young? One or both?

- ☐ Yes, One  
☐ Yes, Both  
☐ No

55) If you asked them, would they tell you the truth about having used marijuana?

- ☐ Yes  
☐ No

56) In a typical week, how many times do you and your parents have dinner together as a family?

- \_\_\_ 0
- \_\_\_ 1
- \_\_\_ 2
- \_\_\_ 3
- \_\_\_ 4
- \_\_\_ 5
- \_\_\_ 6
- \_\_\_ 7

57) Most of the time, do your parents know what you do on weekends, or not?

- \_\_\_ Mostly know
- \_\_\_ Mostly do not know
- \_\_\_ I don't know

58) Do you have a specific time you have to be in the house on weekend nights? What is that time?

- \_\_\_ No curfew
- \_\_\_ 10:00 PM or earlier
- \_\_\_ 10:30- 12:00 AM
- \_\_\_ After Midnight

59) Do you live with both your natural parents, with one natural parent and one step parent, with just your mother, with just your father, or do you live with someone other than your parents?

- \_\_\_ Two parent home, no step
- \_\_\_ Two parent home, step parent
- \_\_\_ One parent, mother
- \_\_\_ One parent, father
- \_\_\_ One parent, other

60) Do your parents work? Do you both your parents work, or just your father, or just your mother?

- \_\_\_ Mother works
- \_\_\_ Father works
- \_\_\_ Both works
- \_\_\_ No, neither works

61) When you get home from school, is there usually an adult at home? who is that: a parent, a relative, another adult?

- \_\_\_ Yes, a parent
- \_\_\_ Yes, a relative
- \_\_\_ Yes, another adult
- \_\_\_ No one at home

62) How important is religion in your life: very important, fairly important, not too important, not important at all?

- \_\_\_ Very important
- \_\_\_ Fairly important
- \_\_\_ Not too important



\_\_\_ Not important at all

63) In a typical month, how often do you attend church or religious service?

- \_\_\_ Once
- \_\_\_ 1-3 times
- \_\_\_ weekly
- \_\_\_ More than once a week

64) What is your main racial or ethnic heritage: Hispanic or Latino-American( whether black or white), white but not Hispanic, African- American or Black but not Hispanic, Asian-American, Native American, or Other?

- \_\_\_ Hispanic or Latino
- \_\_\_ White, but not Hispanic
- \_\_\_ African-American
- \_\_\_ Asian-American
- \_\_\_ Native-American
- \_\_\_ Other\_\_\_\_\_

65) What kind of grades do you get in school?

- \_\_\_ Mostly A's
- \_\_\_ Mostly A's and B's
- \_\_\_ Mostly B's and C's
- \_\_\_ Mostly C's and D's
- \_\_\_ Mostly D's and F's

66) What is the highest level of education that either of your parents completed?

- \_\_\_ Some High School or Less
- \_\_\_ Completed High School
- \_\_\_ Vocational School or some College
- \_\_\_ College Graduate
- \_\_\_ Post Graduate
- \_\_\_ Don't know

67) Do you consider yourself to be overweight, underweight, or is your weight about where it should be?

- \_\_\_ Overweight
- \_\_\_ Underweight
- \_\_\_ Weight about where it should be

69) How likely do you think it is that at some point in the future you will try an illegal drug: is it very likely, somewhat likely, not very likely, or it will never happen?

- \_\_\_ Very Likely
- \_\_\_ Somewhat likely
- \_\_\_ Not very likely

\_\_\_\_\_ Never Happen